

**DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION**

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WATER-BASED HYDROPHILIC COATING COMPOSITIONS AND ARTICLES PREPARED THEREFROM, the specification of which was filed on February 7, 1997 and has been assigned to Serial No. 08/796,987.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which the priority is claimed.

<u>Application Number</u>	<u>Country</u>	<u>Filing Date</u>	<u>Yes</u>	<u>No</u>
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national filing date of this application.

<u>Application Number</u>	<u>Filing Date</u>	<u>Status</u>
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I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the

manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national filing date of this application.

Provisional Application(s):

<u>60/011,391</u>	<u>09 February 1996</u>	<u>Pending</u>
Application Number	Filing Date	Status

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Mary Rose Scozzafava, Reg. No. 36,268; Sam Pasternack, Reg. No. 29,576; Mary Raynor Jimenez, Reg. No. 37,219; David J. Powsner, Reg. No. 31,868; Brenda H. Jarrell, Reg. No. 39,223; Kevin M. Tormey, Reg. No. P-41,351; and Douglas D. Robinow, Reg. No. P-40,787.

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Address all correspondence to Mary Rose Scozzafava at Choate, Hall & Stewart, Exchange Place, 53 State Street, Boston, Massachusetts 02109.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Margaret P. Opolski  
Inventor's signature Margaret P. Opolski Date 6/12/97  
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Citizenship \_\_\_\_\_  
Post Office Address \_\_\_\_\_

Full name of second inventor \_\_\_\_\_  
Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_  
Residence \_\_\_\_\_  
Citizenship \_\_\_\_\_  
Post Office Address \_\_\_\_\_

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